PART B - FEE(S) TRANSMITTAL

or Fax (571)-273-2885

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maintenance fee notifications. CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)				Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.			
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22907 7590 07/11/2006 BANNER & WITCOFF 1001 G STREET N W SUITE 1100				Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.			
WASHINGTON, DC 20001				(Depositor's name)			
						(Signature)	
						(Date)	
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR	. A'	TTORNEY DOCKET NO.	CONFIRMATION NO.	
10/003,184	10/30/2001		Frederic Reblewski		109894-129746	4114	
TITLE OF INVENTION: EMULATION COMPONENTS AND SYSTEM INCLUDING DISTRIBUTED EVENT MONITORING, AND TESTING OF AN IC DESIGN UNDER EMULATION							
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE F	EE TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	МО	\$1400	\$300	\$0	\$1700	10/11/2006	
EXAMINER		ART UNIT	CLASS-SUBCLASS				
THANGAVELU, KANDASAMY		2123	703-028000				
 Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. 			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.				
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) MENTOR GRAPHICS CORPORATION							
Wilsonville, Oregon 97070-7777 Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government							
4a. The following fee(s) are submitted: Issue Fee Publication Fee (No small entity discount permitted) Advance Order - # of Copies			b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) A check is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 19-0733 (enclose an extra copy of this form).				
5. Change in Entity Status a. Applicant claims Si	· / / /	' Ai	b. Applicant is no long	ger claiming SMALL	ENTITY status. See 37 Cl	FR 1.27(g)(2).	
NOTE: The Issue Fee and Printerest as shown by the reco	ublication Fee (if requords of the United State	ired) will not be accepte a Patent and Trademark	l from anyone other than th	ne applicant; a register	red attorney or agent; or th	ne assignee or other party in	
Authorized Signature Typed or printed name	Christopher L.	4 1000	Me	Date	12/06		
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